

## **Application Data Sheet**

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of Copies of CDs::  
Sequence Submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: SUCTION DEVICE  
Attorney Docket Number:: LIANG12  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 3  
Small Entity?:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Taiwan  
Status:: Full Capacity  
Given Name:: Chi-Wang  
Middle Name::

Family Name:: LIANG

Name Suffix::

City of Residence:: Jhonghe City

State or Province of Residence::

Country of Residence:: Taiwan

Street of Mailing Address:: No. 111, Minsiang St., Taipei County 235

City of Mailing Address:: Jhonghe City

State or Province of Mailing Address::

Country of Mailing Address:: Taiwan

Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Taiwan

Status:: Full Capacity

Given Name:: Chung-Heng

Middle Name::

Family Name:: YANG

Name Suffix::

City of Residence:: Taiping City

State or Province of Residence::

Country of Residence:: Taiwan

Street of Mailing Address:: No. 43, Alley 7, Lane 336, Shusiao Rd.,  
Taichung County 411

City of Mailing Address:: Taiping

State or Province of Mailing Address::

Country of Mailing Address:: Taiwan

Postal or Zip Code of Mailing Address::

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

Application:: Continuity Type:: Parent Parent Filing

Application:: Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Taiwan	93101428	01/19/04	No

**Assignment Information**

Assignee Name::	Chi-Wang LIANG
Street of Mailing Address::	No. 111, Minsiang St., Taipei County 235
City of Mailing Address::	Jhonghe City
State or Province of Mailing Address::	
Country of Mailing Address::	Taiwan
Postal or Zip Code of Mailing Address::	